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J1036 U.S. PTO
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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.55(b))

Attorney Docket No. INL-032

First Named Inventor Blouin et al.

Title SAMPLE WELL STRIPS

APPLICATION ELEMENTS		ADDRESS TO: Box Patent Application Commissioner for Patents Washington, D.C. 20231
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form</p> <p>2. <input type="checkbox"/> Small Entity Status <input type="checkbox"/> Applicant claims small entity status <input type="checkbox"/> Status established in prior application and is still proper and desired</p> <p>3. <input checked="" type="checkbox"/> Specification and Drawings [Total Pages 27] - Written Description - (11 pages) - Claims - (4 pages) - Abstract - (1 page) - Sheets of Drawings - (11 sheets) <input checked="" type="checkbox"/> Formal <input type="checkbox"/> Informal</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 3] a. <input checked="" type="checkbox"/> Newly executed (original) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed) [Note Box 5 below]</i></p> <p>5. <input type="checkbox"/> Incorporation by Reference (usable if Box 4b is checked) The entire Disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet</p> <p>7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <input type="checkbox"/> Computer Readable Form (CRF) <input type="checkbox"/> Paper Copy (identical to computer copy) <input type="checkbox"/> CD (2 copies) (identical to computer copy) <input type="checkbox"/> Statement verifying identity of above copies</p> <p>17. <input type="checkbox"/> If a CONTINUING APPLICATION: Amend the specification by inserting on page 1, before the first line, the sentence: --This is a <input type="checkbox"/> continuation <input type="checkbox"/> divisional <input type="checkbox"/> continuation-in-part of prior application Serial No. / , filed on , , the entire disclosure of which is incorporated by reference herein.--</p> <p>Priority to the above application(s) is claimed under 35 U.S.C. 120. Prior application information: Examiner: . Group/Art Unit: .</p> <p>18. <input type="checkbox"/> Priority - 35 U.S.C. 119 <input type="checkbox"/> Priority of application Serial No. filed on in is claimed under 35 U.S.C. 119. <input type="checkbox"/> The certified copy has been filed in prior U.S. application Serial No. / on . <input type="checkbox"/> The certified copy will follow.</p>		ACCOMPANYING APPLICATION PARTS
<p>8. <input type="checkbox"/> 37 CFR 3.73(b) Statement (<i>when there is an assignee</i>) <input type="checkbox"/> Power of Attorney</p> <p>9. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)</p> <p>10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>11. <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Drawings [Total Sheets]</p> <p>12. <input checked="" type="checkbox"/> Return Receipt Postcard (<i>specifically itemized</i>)</p> <p>13. <input type="checkbox"/> Certified Copy of Priority Document(s) (<i>if foreign priority claimed</i>)</p> <p>14. <input type="checkbox"/> Nonpublication Request Under 35 U.S.C. 122(b)</p> <p>15. <input type="checkbox"/> CD in duplicate for large table or computer program</p> <p>16. <input type="checkbox"/> Other: _____</p>		
CORRESPONDENCE ADDRESS		
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100 Customer No. 021323		SIGNATURE BLOCK
		Respectfully submitted,  Ronda P. Moore, D.V.M. Attorney for Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110

2217818

FEE TRANSMITTAL
FY 2002

Complete if Known	
Application Serial Number	Not yet assigned
Filing Date	Herewith
First Named Inventor	Blouin et al.
Group Art Unit	Not yet assigned
Examiner Name	Not yet assigned
Attorney Docket No.	INL-032

METHOD OF PAYMENT

1. Payment Enclosed:
 Check Money Order Other

2. The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531.
 Required Fees (copy of this sheet enclosed).
 Additional fee required under 37 CFR 1.16 and 1.17.
 Overpayment Credit.

3. Applicant claims small entity status.

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	Request for ex parte reexamination	
110	55	Extension for reply within first month	
400	200	Extension for reply within second month	
920	460	Extension for reply within third month	
1440	720	Extension for reply within fourth month	
1960	980	Extension for reply within fifth month	
320	160	Notice of Appeal	
320	160	Filing a brief in support of an appeal	
280	140	Request for oral hearing	
130	130	Petitions to the Commissioner	
180	180	Submission of Information Disclosure Statement	
740	370	Filing a submission after final rejection (37 CFR 1.129(a))	
740	370	For each additional invention to be examined (37 CFR 1.129(b))	
100	100	Certificate of Correction for applicant's error	
Other fee (Specify)			
Other fee (Specify)			

FEE CALCULATION**1. FILING FEE****Large Entity**

Fee (\$)	Fee Description	Fee Paid
740	Utility filing fee	740.00
330	Design filing fee	
160	Provisional filing fee	

	Number Filed	Number Extra	Rate	Amount
Total Claims	27	- 20 = 7	x \$ 18.00 =	126.00
Independent Claims	4	- 3 = 1	x \$ 84.00 =	84.00

Multiple Dependent Claim(s), if any \$280.00 =

TOTAL: 950.00

SMALL ENTITY DISCOUNT:

SUBTOTAL (1) (\$) 950.00

2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
Total	-	=	x \$ 18.00 =	
Indep.	-	=	x \$ 84.00 =	
<input checked="" type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$280.00 =	
				TOTAL: (\$)
				SMALL ENTITY DISCOUNT: (\$)
				SUBTOTAL (2) (\$)

SUBTOTAL (3) (\$) 00.00

SUBTOTAL (1) 950.00
 SUBTOTAL (2) 00.00
 SUBTOTAL (3) 00.00

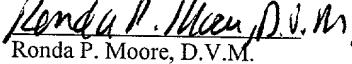
TOTAL (\$) 950.00

CORRESPONDENCE ADDRESS**SIGNATURE BLOCK**

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